

[illegible]

FOR PROFESSIONAL USE ONLY  
CONFIDENTIAL RECORD  
NOT TO BE PHOTO COPIED

EDICATIONS		HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE																																				
ARTING FOR		3/1/05		THROUGH		3/31/05																			Telephone No.		Medical Record No.									
ysician		Siddig																			Alt. Telephone		187140													
t. Physician																			Rehabilitative Potential																	
tergies																																				
agnosis																																				
edicaid Number		Medicare Number		Complete Entries Checked:																	Title:		Date:													
PATIENT		Wright Richard		Patricia Robles																	up		PATIENT CODE		ROOM NO.		BED		FACILITY CODE							
																					187140						2/28/05		Bact							

## STD01

**FOR PROFESSIONAL USE ONLY  
CONFIDENTIAL RECORD  
NOT TO BE PHOTO COPIED**

MEDICATIONS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE																													
CHARTING FOR														THROUGH															
Physician														Telephone No.										Medical Record No.					
Alt. Physician														Alt. Telephone															
allergies <i>Tylenol; PPD Mantox</i>														<i>March 2005</i>										Rehabilitative Potential					
Diagnosis																													
Medicaid Number							Medicare Number							Complete Entries Checked: By: <i>E. Johnson</i>															
PATIENT <i>Wright, Richard</i>														Title: <i>WPN</i> PATIENT CODE <i>18714n</i>					ROOM NO.			BED		FACILITY <i>1/n</i>		Date: <i>3/23/05</i>			

## MEDICATION ADMINISTRATION RECORD

STD01

[illegible]

FOR PROFESSIONAL USE ONLY  
CONFIDENTIAL RECORD  
NOT TO BE PHOTOCOPIED

NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE									
CHARTING FOR		THROUGH							
Physician		Siddig						Telephone No.	
Alt. Physician								Alt. Telephone	
Ergies		NKA						Rehabilitative Potential	
Diagnosis									
Medicaid Number		Medicare Number		Complete Entries Checked:					
				By: MKuen					
PATIENT		Wright, Richard				Title: R		Date: 1/28/05	
PATIENT CODE		ROOM NO.		BED		FACILITY			
187140						BCC			



**MEDICATION ADMINISTRATION RECORD**

STD01

*venkess***MEDICATIONS****HOUR**

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29

*Adul 800mg PO*  
*T.i.d x 7 days*  
*2/25/05 - 3/4/05*

*0400*  
*1100*  
*1700*

*SHAWN*  
*LEE*  
*RICKE*

*Benzoyl Peroxide*  
*X 20 days*  
*2/25/05 - 3/14/05*

*Kop*  
*Kop*

**FOR PROFESSIONAL USE ONLY**  
**CONFIDENTIAL RECORD**  
**NOT TO BE PHOTOCOPIED**

**MEDICATIONS****HOUR**

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

**NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE**

CHARTING FOR

THROUGH

Physician

Alt. Physician

Telephone No.

Alt. Telephone

Medical Record No.

Allergies

Rehabilitative  
Potential

Diagnosis

Medicaid Number

Medicare Number

Complete Entries Checked

By

Title

PATIENT

PATIENT CODE

ROOM NO.

Date

BED

FACILITY CODE

*Wright Richard*

*187140*

*187140*

*2/25/05*

*Bea*

## MEDICATION ADMINISTRATION RECORD

STD01

[illegible]

MEDICATIONS		HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30							
NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE																																							
CHARTING FOR 11/1/05		THROUGH 11/31/05																																					
Physician Siddle																Telephone No.										Medical Record No. 187140													
Physician																Alt. Telephone																							
Allergies NKA																Rehabilitative Potential																							
Diagnosis																																							
Medicaid Number								Medicare Number								Complete Entries Checked: Carolyn Dees								Title: Lpn								Date: 12/31/04							
PATIENT Wright, Richard																PATIENT CODE 187140								ROOM NO.				BED		FACILITY C Buell									



## MEDICATION ADMINISTRATION RECORD

STD01

MEDICATIONS	HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Tylenol 650mg po Tid x 10 days 12/14-12/24/04 Siddig/Ches	0400 1100 1700																													
Maalox T po bid x 10 days 12/14-12/24/04 Siddig/Ches	0700 1100 1700																													
Anusol Sup i BID x 7 days 12-17-04 12-25-04	0400 1700																													
Tylenol 500mg ii po BID PRN x 14 days 12-23-04 1-5-05	R N																													
Maalox 30cc po Tid PRN x 14 days 12-23-04 1-5-05	R N																													

FOR PROFESSIONAL USE ONLY  
CONFIDENTIAL RECORD  
NOT TO BE PHOTO COPIED

MEDICATIONS	HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE																															
CHARTING FOR 12/14/04																THROUGH 12/31/04															
Physician Siddig																Telephone No.															
Alt. Physician																Alt. Telephone															
gics ENKDA																Rehabilitative Potential															

Diagnosis		Medicaid Number		Medicare Number		Complete Entries Checked:		By: C. Lees		Title: Lpn		Date: 12/14/04	
PATIENT Wright, Richard		187146		ROOM NO.		BULL		FACILITY CODE		187146		187146	

## MEDICATION ADMINISTRATION RECORD

12/01/2004

STD01

(BUL-465) BULLOCK CORRECTIONAL FAC

[illegible]

MEDICATIONS			HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE																																	
CHARTING FOR		12/01/2004	THROUGH	12/31/2004																													
Physician		SIDDIQ, M.D. (MD DIR, TAHIR										Telephone No.										Medical Record No.											
Alt. Physician												Alt. Telephone																					
Allergies		NO KNOWN DRUG ALLERGY										Rehabilitative Potential																					

Diagnosis				
Medicaid Number	Medicare Number	Complete Entries Checked:		
		By: <i>D. Rogers</i>	Title: <i>PN</i>	Date: <i>11/30</i>
PATIENT			PATIENT CODE	ROOM NO.
<b>WRIGHT, RICHARD</b>			<b>187140</b>	<b>1</b>
				BED FACILITY
				<b>PH</b>



## MEDICATION ADMINISTRATION RECORD

STD01

MEDICATIONS		HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
Mylanta tabs $\frac{1}{2}$ PO PRN x 10 days 11-19-04 — 11-29-04	PRN		[Handwritten: 1000 9000 400 15]																												
Miconazole Cream x 20 days 11-19-04 — 12-9-04			[Handwritten: 1000 9000 400 15]																												
AF Cream x 20 days 11/24-12/14/04 Siddig Scary	to P		[Handwritten: 1000 9000 400 15]																												
Onamcinolone Cream x 20 days 11/24-12/14/04 Siddig Scary	to P		[Handwritten: 1000 9000 400 15]																												
<b>FOR PROFESSIONAL USE ONLY</b> <b>CONFIDENTIAL RECORD</b> <b>NOT TO BE PHOTO COPIED</b>																															

MEDICATIONS		HOUR	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
NURSE'S ORDERS, MEDICATION NOTES, AND INSTRUCTIONS ON REVERSE SIDE																																
CHARTING FOR		11-17-04 THROUGH 11-30-04																														
Physician		Siddig															Telephone No.										Medical Record No.					
Alt. Physician																	Alt. Telephone										187140					
Diagnosis		NKA															Rehabilitative Potential															
Medicaid Number		Medicare Number										Complete Entries Checked										Title: LPN										
PATIENT		Muriel A. Richards										By: M. Jackson										Date: 11-19-04										
PATIENT CODE		ROOM NO.										BED										FACILITY										



**INSTITUTIONAL EYE CARE**

P.O. Box 390

(570) 523-3493

Lewisburg, PA 17837

FAX (570) 524-2817

<b>PATIENT</b> WRIGHT, RICHARD			<b>DATE</b> 7/25/2005		
<b>NUMBER</b> 187140			<b>INSTITUTION</b> VENTRESS CORRECTIONAL		
<b>SPHERE</b>			<b>CYLINDER</b>	<b>AXIS</b>	<b>PRISM</b>
<b>OD</b>	-2.75	0.00	0	0	
<b>OS</b>	-2.50	0.00	0	0	
<b>ADD</b>			<b>HEIGHT</b>	<b>DIST PD</b>	<b>NEAR PD</b>
<b>OD</b>	0.00	0	72	0	
<b>OS</b>	0.00	0	0	0	
<b>LENS COLOR/COATINGS</b>			Clear		
<b>FRAME</b> NICK		<b>STYLE</b>	<b>FRAME COLOR</b> GREY		
<b>EYE SIZ</b> 52		<b>DROP BALL</b>	<b>FINAL INSPECTION</b>		

LENSES:	\$4.95
FRAME:	\$3.49
OVERSIZE:	\$0.00
TINT/PGX:	
POLYCARB:	\$0.00
DIOPTERS:	\$0.00
PRISM:	\$0.00
CASE:	
OTHER:	
S/H:	\$1.35
<b>TOTAL DUE (\$):</b>	<b>\$9.79</b>

**VISION SAFETY NOTICE:**

- Your lenses meet or exceed American National Standard Z80.1 and FDA requirement 21CFR Sec 801.410 for impact resistance but are not unbreakable or shatterproof. Of all the materials that lenses can be made from polycarbonate is the most impact resistant.

- If struck with sufficient force, the lenses can break into sharp pieces that can cause serious injury to the eye, or blindness. Even if the lenses do not break, the force of impact may cause the lenses or spectacle frame to contact the eye or surrounding area causing injury.

- The continued impact resistance of your lenses depends on how well you protect them from physical shocks and abuse. For your own protection, scratched or pitted lenses should be replaced immediately.

-If your occupational or recreational activities expose you to the risk of flying objects or physical impacts, your eye safety requires special safety spectacles with safety lenses, side shields, goggles and/or a full face shield.

**FOR PROFESSIONAL USE ONLY**  
**CONFIDENTIAL RECORD**  
**NOT TO BE PHOTO COPIED**



PRISON  
HEALTH  
SERVICES  
INCORPORATED

DEPARTMENT OF CORRECTIONS  
EYE CHART

Date	Time	OLD RX Worn from					
Visual Requirements		Sph.	Cyl.	Axis	Prism	Base	Add
Other Visual Requirements							
Previous Eye History	Eye glasses						
Chief Visual Complaints	Blurred vision at times						
Detailed History							
General Health	Rx						
External Examination	- 275 / F2W 250 / 72						
Internal Examination	52 / 18 / 145						
Visual Field Screening	OD 20/70 OS 20/50						
Tonometry							
Instrument / V.A. (Habitual)	OD OS						
Dist.	OD OS OU						
Near	OD OS OU						
Dominance / Test	/						
Pupillary Reflexes	Size Light						
	Consensual Near						
Tests for Squint	Inspection						
	Cover						
	Corneal Reflex						
PD / PP Conv							
PP Acc							
V. ons							
Rotations / Fixations							

OD OS  
OD ONLY  
CD/WNL OS  
NOT TO BE PHOTO COPIED

38

INMATE NAME (LAST, FIRST, MIDDLE)	DOC#	DOB	R/S	FAC.
Wright Richard	127176	8/15/62	Bim	Blif